510(k) Summary Information

Premarket Notification, Section 510(k)

THERMAGE, INC.
NOVEMBER 28, 2005

Regulatory Authority: Safe Medical Devices Act of 1990, 21 CFR 807.92

Trade Name:

Thermage ThermaCool System

Common

Name(s):

Electrosurgical cutting and coagulation device

Classification

Name(s):

Electrosurgical cutting and coagulation device

Establishment Name & Registration Number:

Name:

THERMAGE, INC.

Number:

Classification(s):

§ 878.4400 Electrosurgical cutting and coagulation device and accessories.

Identification. An electrosurgical cutting and coagulation device and accessories is a device intended to remove tissue and control bleeding by use of high-frequency electrical current.

Classification. Class II.

Device Class:

Class II for all requested indications

Classification Panel: General and Plastic Surgery

Product Code(s):

GEL

Equivalent Predicate Device:

The Thermage ThermaCool System is substantially identical to the following device system:

Device Description:

This special 510(k) application covers a system identical to the earlier devices and clearances.

The Thermage ThermaCool System consists of the following components:

- *RF Generator
- *Cooling Module
- *Cryogen Canister
- *Handpiece Assembly (consisting of Handpiece and Treatment Tip)
- *Accessory cables and tubing
- *Optional footswitch component
- *Accessories: coupling fluid, return pad and skin marking paper

Indications for Use:

The *Thermage ThermaCool System* is indicated for use in Dermatologic and General Surgical procedures for electrocoagulation and hemostasis. Non-invasive treatment of wrinkles & rhytids.

Applicant Name & Address:

Thermage, Inc. 25881 Industrial Blvd. Hayward, CA 94545-2991 510 782 2286 voice 510 782 2287 fax





DEC 1 3 2005

Food and Drug Administration 9200 Corporate Boulevard Rockville MD 20850

Ms. Pamela M. Buckman, RN, MS V. P. Clinical & Regulatory Affairs Thermage, Inc. 25881 Industrial Blvd. Hayward, California 94545-2991

Re: K053365

Trade/Device Name: Thermage ThermaCool System

Regulation Number: 21 CFR 878.4400

Regulation Name: Electrosurgical cutting and coagulation device and accessories

Regulatory Class: II Product Code: GEI

Dated: November 30, 2005 Received: December 2, 2005

Dear Ms. Buckman:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to such additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the Federal Register.

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Part 801); good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

This letter will allow you to begin marketing your device as described in your Section 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801), please contact the Office of Compliance at (240) 276-0115. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21 CFR Part 807.97). You may obtain other general information on your responsibilities under the Act from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (301) 443-6597 or at its Internet address http://www.fda.gov/cdrh/industry/support/index.html

Sincerely yours,
Saway And Saway

Mark N. Melkerson

Acting Director

Division of General, Restorative and Neurological Devices

Office of Device Evaluation

Center for Devices and Radiological Health

Enclosure

510(k) NUMBER (IF KNOWN):

Not Known

KOS3365

DEVICE NAME:

Thermage ThermaCool System

INDICATIONS FOR USE:

The Thermage ThermaCool System is indicated for use in:

- Dermatologic and general surgical procedures for electro coagulation and hemostasis
- Non-invasive treatment of wrinkles and rhytids

Prescription Use	X	OR	Over-The-Counter-Use	
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(Per 21 CFR 801.109)

Concurrence of CDRH, Office of Device Evaluation (ODE)

Division Sign-Off)

Division of General, Restoraum

and Neurological Devices

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